

# THE CALIFORNIA HOMŒOPATH.

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## Original Articles.

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### CALENDULA IN SURGERY.

By E. T. BALCH, M. D., SOUTH BEND, WASH.

In these days of antiseptic craze it is gratifying to be able to record the results obtained by means of calendula in all classes of surgery, as being superior to all other agents so lauded to the world for a brief time, and then to give place to the next, and so on *ad infinitum*; hence I send you the annexed cases—not selected by any means—to exemplify the all-sufficiency of the homœopathic remedy, which never changes.

#### FIRST CASE.

April 20, 1889—Annie A——, æt. 9, blonde, whilst playing fell on some broken glass, severing the left deep Palmar arch. Of course the hæmorrhage was alarming, but by means of cording and styptics it was for a short time checked, only to break forth again on the least relaxation of the cincture. This condition of things had existed for four weeks, when friends, becoming alarmed for the life of the child, concluded to seek surgical aid.

March 20th—On being summoned, found the little patient weak, blanched, the left hand swollen and purple from con-



striction at the wrist. I saw at a glance that operative measures were imperative; so, administering an anæsthetic, proceeded to search for the Palmar arch, but found the tissues so engorged that it was impossible to secure that vessel; so ligated both radial and ulnar arteries in lower third. Approximated two incisions by means of intuscepted sutures, and applied a compress of absorbent cotton dry, secured by a light roller; used gut sutures. For wound in palm, ordered calendula douches 1-20 five times a day, and calendula internally.

March 25th, discontinued calendula externally to hand, and treated dry, same as wrist; calendula internally as before.

March 30th—On removing dressing from wrist, no tenderness; healing by first intention had taken place; only a scar on each side of wrist to show the line of incision remains.

During the whole time the patient had no other remedy than calendula. Of course, Bush's bovine and grape juice with liberal diet. What I wish to emphasize is the wondrous power that calendula has to prevent suppuration.

#### SECOND CASE.

February 4th—A. Gunnison, æt. 20, brunette, temperate habits. His right hand and wrist were caught in planer of saw-mill. Under an anæsthetic, amputated forearm, upper third, antero-post-flap; and arteries ligated with gut ligatures. Checked oozing by means of hot water. After thoroughly drying, inserted a decalcified bone drainage-tube, and approximated the flaps by means of gut intuscepted sutures. Applied a dry compress of absorbent cotton secured by a few turns of a recurrent roller. Prescribed calendula 6x three times a day.

February 8th—Removed dressing and cleansed with calendula. No fever; very little tenderness.

February 12th—Allowed patient to take exercise. Stump looks well; drainage-tube absorbed; not a particle of discharge or odor.

February 20th—Discharged case with an excellent stump for an artificial limb.



## CHROMIC ACID.

By J. D. CHAFFEE, M. D., GARDEN GROVE, CAL.

Two or three articles have come under my notice of late concerning chromic acid as a cauterant and the dangers attending its use; first in the *Homœopathic Recorder* of September, 1889, and again in the January number of the *American Homœopathist*; and as they do not accord with my experience I thought it might not be amiss to relate a little of the same. I have used it with excellent results in erosion of the os uteri from laceration; and also in cervicitis, removing the erosion and leucorrhœa with but few applications. Have used it in scrofuloderma, curing up the sore at once. In a case of lupus vulgaris of six years' standing, where an old-school physician had failed with the use of iodine and other remedies, I commenced treatment by applying the acid quite strong, causing the sore to inflame; after which applied thuja cerate until irritation was removed; then repeated the application both with the acid and cerate until the sore was entirely healed. I also used it successfully in a fibroid tumor; said tumor was on the face of a boy eight years of age, over the zygomatic minor muscle, just under the tegument. Wishing, if possible, to remove without the use of knife and prevent scar, I commenced applying the acid often until sore, then healed as in other cases with thuja cerate, repeating applications until, at the end of several weeks, it came out a dead mass; after which it healed over with scarcely a trace of scar. Have also used it successfully in removing corns and warts. When applied to a mucous membrane, I commence carefully with a ten-per-cent. solution, then gradually working up to a saturated mixture, always using the best freshly-made crystal, avoiding anything half dissolved or of a dark color; also careful to dilute with water instead of glycerine on account of its explosive tendencies; always applying to the disease part with glass rod. To eliminate chromic acid from my list of remedies would be to cripple my effective work as a practitioner.

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PEDICULI PUBIS may be killed by a single application of ether to the parts.—*Era.*



THOUGHTS ON MEDICAL LEGISLATION AS SUG-  
GESTED BY THE RECENT DECISION OF THE  
SUPREME COURT OF ALABAMA.

BY DR. H. M. PAINE, ALBANY, N. Y.

The discussion of the subject of medical licensure has recently received a new impetus by the outrageous conduct of "our friends the enemy" in Alabama.

It appears that the allopathic school has had complete control, for a number of years, of the examination and licensing of all physicians who desired to practice medicine in that State. Nearly all the old-school physicians in the State, more than seventeen hundred in number, have complied with the requirements of the law, fifteen however, refused to submit to an examination, among them, two were homœopathic physicians, both graduates of homœopathic medical colleges, the trial of one of these, Dr. G. G. Lyon, being set down for the twenty-first of January.

An old-school physician, a Dr. Brooks was at first convicted by the Circuit Court, but on appeal to the Supreme Court was acquitted.

Dr. Brooks having been acquitted, in all probability the indictment against Dr. Lyon will be quashed, and, neither he nor Dr. Meyers, will, for the present at least, be hampered by the officious interference of illiberal allopathic physicians.

Notwithstanding this temporary suspension of allopathic antagonism, the cases of these two reputable homœopathic physicians, graduates of homœopathic medical colleges, indorsed by the American Institute of Homœopathy, are invested with more than ordinary interest to the homœopathic medical profession throughout the whole country.

Their courageous resistance to all allopathic oppression should receive our hearty approval, and their trials and hardships, endured in behalf of a common cause, should awaken on our part responsive sympathy, and, if need be, the bestowal of contributions sufficient to defray the expense incurred thereby.

In this instance these two young physicians are not by any means the only sufferers from allopathic intolerance and



high-handed illiberality, wrought ostensibly under cover of justice, and in behalf of public interests.

The welfare of every homœopathic physician in the whole country is jeopardized by this Alabama experience. Their failure will render more difficult attempts on our part in other States at checking allopathic aggression; and their success will assist in establishing a precedent in support of the proposition, recognized since the foundation of this government, that each school and system in medicine as in religion, shall have entire freedom in the exercise of the *civil* functions having relevancy to the management and maintainance of its own educational affairs.

For these reasons it is desirable to notice in connection with these cases two of the more important points.

One is, the fact that Dr. Brooks escaped on a mere technicality, viz., that the civil and penal codes were not "co-extensive" in their "provisions," a conflicting condition which was inadvertently introduced during a recent revision of the code, and one which unquestionably will be speedily amended.

The other important point to be noted is, that the *right of the State to control medical practice by county and State authority is most emphatically affirmed.*

Dr. Cochran, State health officer, as reported in the *Birmingham Age-Herald*, of December 28th, 1889, states:

"The decision of the Supreme Court sustained the law all the way through, but construed away the penalty of its violation. It says, in effect, that Dr. Brooks has no right to practice medicine in Alabama *on a mere diploma, and without a certificate from the regularly constituted examining board*; that he is in violation of law, but that there is no penalty attached to such violation; in short, that the law is all right, but there is no way to enforce it."

Judge Stone in his decision, as reported in the *Montgomery Advertiser*, of December 17th, 1889, expresses his opinion, in the following forcible utterances:

"That the State, under its *police power*, clearly possesses the power to prohibit any person from practicing medicine without a license, or other test for ascertaining the qualifications and fitness of the applicant. That this power is sup-



ported by the same principle as that which justifies 'quarantine, compulsory vaccination, sanitary sewerage, and many forms of public nuisance.' It is a mere agency for protecting the public against the dangers of charlatanism or quackery in medicine; and that this power is lawfully lodged in the medical boards of the State, and it is no objection that the law goes into effect upon the contingency of medical county boards organized in the counties. Local option laws are made operative upon precisely the same principle."

The judge held substantially, that while the civil code required compliance with a *single* provision, viz., a *license* from a county board, the penal code did not hold a physician liable if he had complied with either one of *four* provisions, viz., a license; a diploma; a certificate of qualifications; or, being a regular graduate of a medical college in Alabama, his diploma being legally recorded. Dr. Brooks having obtained a diploma from a regular medical college in Georgia, and his diploma having been recorded by the judge of probate of Russell County, he "had violated no law of the State which subjected him to a criminal prosecution," hence "the judgment of the Circuit Court" was "reversed and the defendant discharged."

The position of the leaders of the allopathic school, having been greatly strengthened as to the most important provision of the law, viz., *the right to establish State medical licensure*, under its *police regulations*, the adjustment of a penalty, more or less severe, will surely and quickly follow.

The homœopathic medical profession of this country, are by this the most recent decision bearing on this subject, brought *face to face with the fact*, that the allopathic school is vigorously prosecuting the work of establishing *State medical licensure*, State by State in this country, and that the decisions of the highest State courts sustain the principle underlying such action.

The vital question therefore, for homœopathic physicians everywhere to determine, and decide with as little delay as possible, has relevancy as to whether the allopathic school shall *monopolize* the exercise of this civil privilege, as is now being done in Alabama, and a few other States, to the serious detriment of our school; or whether, in this readjustment of



medical affairs, precisely the same civil rights and privileges of medical licensure shall be extended to the representatives of the homœopathic school as are given to those of the allopathic.

We have not a moment to lose in dallying with questions as to whether this particular form of State supervision is wise, needed, or expedient. It is surely coming. It has been already established in several States. Its propriety and suitableness has already been sustained by decisions of the highest State courts.

Hence, the only alternative for our school is that of entering upon the work of procuring the passage of laws providing for State boards of examiners for *each* of the incorporated schools of medicine, and this work should be immediately inaugurated by the committees on medical legislation of each State homœopathic medical society.\*

Let the leaders of the homœopathic school in each State at once actively enter upon the work of securing provisions of law by which the examination and licensing of homœopathic students shall be *wholly conducted under homœopathic auspices*.

The American Institute in 1887, 1888 and 1889, adopted resolutions indorsing such action in strong and forcible utterances, and similar sentiments have been repeatedly adopted by large numbers of State and local homœopathic medical societies.

If, in any State, an effective organization cannot be maintained, on account of fewness of numbers of homœopathic practitioners, residing at widely separated localities, effort can and ought at once to be made, for securing homœopathic representation in existing allopathic boards, the homœopathic representatives thereof *to have the same powers and privileges in the board over homœopathic applicants as the allopathic representatives have over allopathic applicants*.

An amendment providing for homœopathic membership in the allopathic board was carried through the legislatures of Delaware and Florida last winter. As a result, notices

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\*[We have this already in California and intend to keep it.—EDS.]



of meetings for examining homœopathic applicants for license are now published in these States.\*

Let other States following in their lead, take the matter immediately in hand and push it to an early completion.

The reason why the homœopathic physicians of Alabama are now put to severe straits is simply because they have allowed the allopathic leaders to obtain complete legal control of the *civil right of licensure*. The people will extend this legal privilege to both schools alike, if asked to do so. The people most assuredly will extend to the different schools and divisions of the medical profession, equal civil privileges upon the same principle as they now confer upon each of the different religious organizations the right to license and ordain applicants for religious orders. In order to acquire the right to exercise this privilege, the homœopathic physicians of that State must apply for it, and make application with such force and persistence as to secure it.

All praise should be given to Drs. Lyon, Meyers and Henry for the noble stand they have taken. If they are in need of funds for securing requisite counsel, homœopathic physicians in other States will unquestionably contribute pecuniary aid.

Circulars and arguments bearing on all the points relating to this important subject, prepared by the Committee on medical legislation of the New York State Homœopathic Medical Society, will be freely furnished by the chairman, Dr. H. M. Paine of Albany.

Dr. Paine will be glad to obtain the names and addresses of the members of the committees on medical legislation of

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\*NOTE.—*Notice to Physicians.*

JACKSONVILLE, FLORIDA, November 29th, 1889. }  
OFFICE OF THE BOARD OF HOMŒOPATHIC MEDICAL EXAMINERS IN AND FOR }  
THE STATE OF FLORIDA.

In accordance with an Act, entitled "An Act to Regulate the Practice of Medicine, etc., approved May 31st, 1889, notice is hereby given that said board will meet in Jacksonville, December 30th, at 10 A. M., and will remain in session two days, adjourning at 10 P. M., December 31st, for the examination of physicians desiring certificates, who hold diplomas recognized by the American Institute of Homœopathy."

(Signed.)

H. R. STOUT, M. D., President,  
T. J. WILLIAMSON, M. D.,  
C. W. JOHNSON, M. D., Secretary.



all State and local homœopathic medical societies, in order that each may be supplied with copies of circulars stating at length the reasons for entering upon this work with alacrity and zeal. In case bills are introduced into any of the State legislatures by the allopathic school, providing for the appointment of a *single* board it is very desirable that he should be informed thereof, and that one or more copies of the proposed bills should be immediately mailed to him.

In a letter dated January 1st, 1890, Dr. J. H. Henry, of Montgomery, Alabama, urges the immediate inauguration of measures for collecting a medical legislation fund of \$10,000 to be used in antagonizing the formation of *the gigantic monopoly* of medical licensure which the allopathic school is endeavoring to establish in this country. He generously offers to be one of one hundred to subscribe one hundred dollars; or one of two hundred to subscribe fifty dollars; or one of four hundred to subscribe twenty-five dollars, to make up the proposed amount.

Dr. Henry, in giving reasons for providing such a fund, issues the following urgent appeal and timely warning.

“Such a fund will enable us to successfully antagonize the form of allopathic *medical censorship* whenever and wherever in any State and Territory, its influence and power is attempted to be made effective. Unless we do this, allopathic antagonism, *by securing legal control of the right to license homœopathic students*, will surely destroy our beloved system; and, as a distinct school, the homœopathic will be doomed to the low and uninfluential status that it now holds in all European countries where the allopathic school holds full legal supremacy. The time for windy speech-making and high sounding resolutions is past. These will prove of little value in this actual contest involving the *life or death* of the homœopathic school of medicine; for, if we fail in this final struggle for the *right to license our own graduates*, our students will refuse to study medicine under homœopathic auspices and will shun our medical colleges. We cannot expect our students to attempt to enter upon practice under the legal disabilities now existing in such States as Alabama, North Carolina and Minnesota.”

I will add, that such a fund can be made immediately



serviceable. The money, as rapidly as collections are paid in, can be wisely and economically applied, partly for procuring suitable counsel, when needed, and mainly in the printing and distribution of suitable articles for publication in the press throughout the country, in order to call public attention to the subject, and to awaken public sentiment in support of our bills. Subscriptions forwarded to Dr. Paine will be promptly acknowledged.

The Committee on legislation of the New York State Society has obtained subscriptions, during the past year, of upwards of five hundred dollars to a medical legislation fund, in aid of the work in that State. It is exceedingly important that similar activity and zeal be promptly manifested by the profession throughout the whole country.

Since writing the foregoing I have noticed Dr. Lyon's statements in several homœopathic journals, to the effect that the recent decision of the Supreme Court, has, temporarily at least, opened the door to the admission of homœopathic practitioners, a license from an allopathic county board being now unnecessary.

The temporary removal of this barrier may lead to larger accessions of homœopathic physicians, and it is to be hoped that it will; at the same time, the situation has its drawbacks, and always will so long as the allopathic school is the *only* one recognized by law.

The government will unquestionably recognize the homœopathic physicians in Alabama, as in all other States, as soon as they effect a legal organization. When this has been perfected a homœopathic licensing board can be secured, under which thralldom from allopathic surveillance will be effectually removed. Until this legal status is established all unlicensed physicians must abide the disabilities growing out of illegal practice.

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IN the German army a powder consisting of three parts of salicylic acid, ten parts of starch, and eighty-seven parts of pulverized soapstone is used for sifting into the shoes and stockings of foot soldiers, to prevent chafing and to heal sore spots on the feet.



## DISEASES OF THE MOTOR PORTION OF THE SPINAL CORD, AND THEIR TREATMENT.

By S. L.

Lateral spinal sclerosis, primary or secondary; acute and chronic poliomyelitis; amyotrophic lateral sclerosis; multiple spinal sclerosis.

Whether unilateral or bilateral, atrophy only develops itself after paralysis has taken place, in most cases the tendon reflexes are exaggerated, contractures of muscles demonstrate the spastic character of these diseases; excepting poliomyelites, electric contractility is not markedly affected, and leaving multiple sclerosis as a non-systemic disease out, we find in the other the sensory functions nearly normal.

For spastic paralysis, may be mentioned in general: Bell., lathyrus, manganum, phosphorus, plumbum, secale, ustilago.

For poliomyelitis, a paresis more than paralysis, with its consequent atrophy: Acon., arn., ars., bell., caust., gels., hyosc., merc., nux v., phos., physost., plumb., rhus, sec., sulph.

For multiple spinal sclerosis: Arg. nitr., baryt., caust., bell., gels., ign, nux vom., oxal. ac., phos., physost., plumb., rhus, sil., tarant. hisp.

For spasmus agitans, tremor of extremities: Baryt., bufo. gels., hyosc., merc., plumb., phos., physost., rhus, sec., tabac. (nicotine), tarant., zinc. brom.

For progressive muscular atrophy: Arg. nitr., ars., caust., cupr., plumb., sulph.

For paralytic weakness with stiffness: Ammon. mur., caust., con., lathyrus, lyc., natr. mur. (tendons, hamstrings shortened), oleander, rhod., rhus, sil.

*Aconite*—Numb, tingling sensation in arms and hands, as though the poles of a galvanic battery were held in hand; often accompanied by coldness; painful sensitiveness of the body to contract; trembling of lower extremities.

*Agaricus*—Senile tremors; crosswise affections; violent pains in paralyzed parts; formication in upper and lower limbs, as if gone to sleep.

*Alumina*—Pain in spine as if a hot iron had been thrust into the part; rheumatic and traumatic paralysis.



*Anacardium*—Paralysis of single parts; bulbar palsy; after apoplexy.

*Angustura*—Tetanic spasms with paralytic conditions.

*Argentum nitr.*—Paraplegia from exhaustion; tendon reflexes diminished.

*Arsenicum alb.*—Affects lower limbs first, extending gradually up to arms; spasmodic twitchings; numbness and formication; myelitis diffusa; progressive muscular atrophy.

*Baryta*—Genuine or precocious senility (even in infants); mental and bodily paralysis.

*Belladonna*—Fresh cases yet in their congestive state.

*Bryonia*—Traumatic myelitis, with much pain at seat of injury.

*Bufo*—Paralysis agitans; idiotic expression; rapid twitchings of whole body.

*Calcarea*—Paralysis from exhausting sweats; loss of semen, from getting often wet; coldness and dampness of extremities.

*Caulophyllum*—Paraplegia from uterine displacements or subinvolution, with partial loss of sensation and emaciation of affected parts.

*Causticum*—Catarrhal and rheumatic conditions; suppressed chronic eruptions; gradually setting in palsy; hemiplegia, especially of flexor muscles; pains in paralyzed parts increase when lameness decreases.

*China*—Paralysis from loss of fluids, after arsenical poisoning; numbness of parts on which he lies.

*Cocculus*—Hysterical palsy; paralytic weakness of cervical muscles; flatulency most troublesome at night, and preventing sleep; quaint desires; spasmodic constriction through whole length of spine, especially on motion.

*Colchicum*—Lameness after suddenly checked foot-sweat, from getting wet all over; paralysis of all muscles of voluntary motion.

*Conium*—Paraplegia after concussion of spine; cicuta, after diphtheria; calc. gels., ascending paralysis; senile palsy of women.

*Cuprum*—(Cupr. ars.) Amyotrophic lateral spinal sclerosis in first stages; ascending from periphery to center; motory palsy with atrophy and contractures or choreic automatic motions.



*Dulcamara*—Paralysis from damp, cold, exposure, or from suppressed eruptions; the paralyzed arms feel icy cold; every motion causes horrid pains in spine and extremities.

*Gelsemium*—Weakness from exhaustion and temporary relief from stimulants; loss of voluntary motion; no loss of sensation. Poliomyelitis.

*Graphites*—Affections of medulla oblongata; dead numbness and coldness ascending from fingers upwards; great faintishness.

*Ignatia*—Hysterical paraplegia from mental and bodily exhaustion.

*Kali iod.*—Paralysis syphilitica.

*Kali phos.*—Exhausted nerve power; paresis (during rest) from moderate exertion.

*Latyrus*—Paresis of lower extremities with trembling gait and emaciation; tendons reflexes exaggerated; hyperæsthesia, (secale, ustilago.)

*Ledum*—Ascending paralysis from the feet upward; bad effects from recent or chronic injuries, especially from punctured wounds.

*Lycopodium*—Paralysis from abdominal stasis and atony; mental, nervous and bodily paresis.

*Manganum*—Paresis begins in lower extremities, he staggers and inclines to run forward when he tries to walk.

*Mercurius*—Jerking in paralyzed parts, violent pains (on motion) at night in bed; paralysis often commences in upper extremities and runs down.

*Natrum mur.*—Paralysis of flexors (plumbum of extensors); over-sensitiveness of spine to touch, and still relief by lying on something hard.

*Nux vom.*—Multiple sclerosis, bulbar paralysis; paresis of arms, with shocks as if the blood would start from the vessels; cincture feeling; sudden loss of power in the legs in the morning, with stiffness and tension; mercurial tremors.

*Oleander*—Vertigo a long time before palsy appears; trembling of knees and hands; painful stiffness of paralyzed limbs.

*Opium*—Paralysis of fundus vesicæ; palsy of intestines, not of rectum; cannot bear the fresh air, and catches cold easily; muscular relaxation with shuffling gait; want of vital re-action; body cold; stupor.



*Phosphorus*—Ducheune-Aren's pseudo-hypertrophic paralysis; in repose, painless twitching of muscles; progressive spinal paralysis with contraction of paralyzed muscles; scoliosis and tuberculosis.

*Phosphoric acid*—Cerebro-spinal exhaustion from overwork.

*Physostigma*—Progressive muscular atrophy; feeling of weakness from occiput to legs; easily worn out from slightest exertion.

*Picric acid*—Wasting palsy; limbs too weak to support the body.

*Plumbum*—Multiple cerebro-spinal sclerosis; progressive muscular atrophy, paralysis of extensors; tremors followed by palsy, with normal sensibility, and when parts are moved they are very painful; hands and feet cold; no sweat.

*Rhus tox.*—Poliomyelites; the great anti-paralyticum; puffiness of the joints with paralytic weakness.

*Secale*—Destroys the activity of the cord; painful contractions with tetanic manifestations (strychnine); increase of tendon reflexes; rapid emaciation.

*Silicea*—Paralysis from defective nutrition of the nervous system, with hyperesthesia; gliomatosis; glandular indurations (often before or after calcarea).

*Sulphur*—Arsenical tremors; congestion of lumbar spine, followed by retention of urine and paraplegia.

*Tarantula hisp.*—Complete loss of muscular power, with formication; great cardiac distress.

*Veratrum alb.*—Painful paralytic weakness in upper and lower extremities; hands and feet icy cold and livid; excessive prostration after debilitating diseases.

*Zincum*—All paretic symptoms < from stimulants (gels. >)

It is curious that the old-school relies so much on the salts of barium, on ergotine plus hyoscine, on zincum phos., nitrate of silver, strychnine, or the muriate of iron, in the treatment of organic spinal affection—remedies which all of us use with confidence according to the totality of the symptoms. General hygienic measures, in order to increase the physical vigor, are of the utmost importance. Cod-liver oil, the malt preparations, ought not to be neglected. Fresh air and cheerful surroundings will often do more than mere medicinal treatment. Scientific massage may be substituted



for active physical exercise, when the patient is unable to walk with ease; and last, but not least, electricity, galvanic, faradic or static. Erb's text-book on electrical treatment ought to be in the hand of every physician. Electricity is a two-edged sword, and he who does not understand it ought to let it alone; and he who understands it fully, let him be sure to have a good working battery, for it cannot be denied that many batteries are made more for sale than for work. A cheap battery is dear at any price.

A great deal of abuse is just now made in our midst with Weir Mitchell's well-known rest cure, and an otherwise good method thus spoiled. Its application is justified where mental and bodily exhaustion needs rest—may it be caused by weakening diseases, or by poisons, or by waste of life-power. A poor paralytic has already more rest than is good for him; though it may have a temporary good effect on him, we can hardly expect a lasting cure therefrom.

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## DUAL CONSCIOUSNESS.

By GEORGE H. MARTIN, M. D., SAN FRANCISCO.

[*Read before the Homœopathic Club at San Francisco, California.*]

I wish to call your attention to-night to a condition of mind which has but recently been recognized, and to a class of cases which are becoming more and more frequent, and from their frequency are becoming of great interest. They are of interest not only from a medical point of view, but also from their medico-legal aspect.

Every little while we take up our daily paper and read of a case of mysterious disappearance. A man leaves his home in the morning, feeling perfectly well, for his place of business. Everything goes on as usual during the day until the hour that he usually arrives home, when he does not put in an appearance. The hours pass and still he does not come. Inquiries are made, when it is found that he has not been to his work that day. An alarm is sounded, and a search is made, but he cannot be found. Days go by, and yet nothing is heard of the missing one; until, finally, all hope is



given up; he has dropped as completely out of sight as if the earth had opened and swallowed him.

The number of persons that disappear in this way each year is rapidly increasing, and how to account for them is the difficulty. Occasionally one comes back, after a length of time, and tells us his story. I will give you an example of a case of this kind:

Mr. W——, a wealthy manufacturer of Chicago, left his office one Saturday forenoon for the bank, to draw some money with which to pay his men. He arrived at the bank, drew \$2,500, and started to return to his office, and nothing more was heard of him. His wife and friends instituted a search, aided by the police, but of no avail. No excuse could be given for his disappearance; his domestic relations were of the happiest, and being the sole member of the firm which he controlled, no crime could be attributed in that respect. Three months later Mr. W. found himself in a public square, in a strange city. He rubbed his eyes and looked about him, as if he had just awakened from a sound sleep. Seeing a policeman, with a uniform on which he did not recognize, he asked him what city he was in. The officer, eyeing him sharply, said "New Orleans." Mr. W. remembered that Mr. A., an intimate friend of his, lived in that city; remembering his address, he inquired the way to his place of business, where he found him. Mr. A., upon seeing him exclaimed in surprise, "Where have you been? We all thought you were dead." Mr. W. said, "I do not know. The last I remember, I left my office for the bank; but whether I ever reached there, or where I went, I can't tell." When told that he had been missing for three months, he was much surprised. The next day he, in company with Mr. A., started for Chicago, where they arrived in due time. His story was, of course, doubted, and it was decided to trace his course, if possible, from Chicago to New Orleans. This was made possible from the fact that in his trunk and valise—which, by the way, he had bought after he left home, with a complete outfit of clothing—were found hotel bills of fare, railroad tickets, baggage checks, etc., which showed that he had been to St. Louis, Kansas City, Charleston (S. C.), Jacksonville (Fla.) and New Orleans. He and Mr. A. started



on this tract, and went to all the different hotels at which he had stopped. At some of them he was remembered; at others, not; but his name was found in the registers of all of them. At Kansas City he stopped for some time, and the clerk of the hotel remembered him well, as he had made himself very agreeable while there; his conduct was that of a perfect gentleman at all times; he paid his bills promptly, and did not forget to fee the porters. At Charleston and Jacksonville, he was remembered, and his conduct at those places was most exemplary. To Mr. W. this was all a blank, and not a single incident could he recall of that three months. He was feeling perfectly well the day that he lost consciousness, and was well the day he recovered. He had several hundred dollars in his pockets, and was neatly dressed as usual. This gentleman, shortly after this, had an epileptic convulsion, and in time became a confirmed epileptic.

We all know how frequently an epileptic will stop in the midst of a conversation, get up, walk about, sit down, and take up the thread of conversation where he left off, and, upon being questioned in regard to his action, will say that he knew nothing of it. We usually term such a condition *petit mal*, or the slighter form of epilepsy, and it is generally followed in a longer or shorter time by a well-defined epileptic sequela. It is not impossible that this man was suffering from *petit mal* during the time of his aberration.

Dr. William A. Hammond cites the following: A young lady about 20, came to his office for treatment. She said that she felt strangely, thought that she was someone else, and could not remember any of her past life. Thinking it a strange case; he told her he would call at her home, which he did the next day. He found that she was working in a store, and her employer said she had been there but a short time. She did her work well, and was always punctual. The doctor followed this case for sometime, when all at once, he lost sight of her, for several months, when she finally came back again; he asked her where she had been, and she said she did not know. She went to her old employer and got her position back again, and things went on as before



for awhile, when she disappeared again, and no trace of her could be found. Some months after the doctor was summoned to another part of the city, to see a young lady who was suffering from epilepsy. What was his surprise, when he arrived at the house, to see his missing patient before him and how much more surprised was he, when she did not appear to recognize him, and disclaimed all knowledge of ever having seen him before. The mother of the young lady was present, and the doctor looked to her for an explanation of the case. She said, that in the past year, her daughter had mysteriously disappeared from home twice, and no trace of her could be found; and when she returned could give no account of herself. The mother, fearing some mental trouble was the cause of the disappearance, had sent for a physician. The doctor then gave his testimony in the case, and everything was made plain.

These two cases represent one class of this remarkable phenomena of dual consciousness, of which epilepsy seemed to be the cause, now for another class. The following is one of eighteen cases collated by Dr. Chas. St. Dana, of New York, of double consciousness.

A young farmer, 23 years of age, of not very great intelligence, was struck on the head with a hammer. He was unconscious for several hours, but finally recovered. He continued to work, and seemed as well as ever, though there was considerable depression of the skull. Four years later, he moved to another town, purchased a farm, and married. His mind seemed normal until after he had been on the farm for four years, when he showed evidence of insanity, and finally became actually maniacal. A physician saw him, and found the depression in the skull, at the junction of the sagittal and coronal sutures. He trephined, and removed a portion of the depressed bone, and the patient immediately recovered consciousness; however, he seemed impressed with the idea, that he had just recovered from the blow on his head. Everything since that time was a blank. He did not know his wife, or that he had one. His neighbors were strangers to him, and everything he had done, had to be explained to him. He had to learn the roads in the neighbor-



hood. He talked intelligently, and candidly. Before the operation, he had been boisterous and turbulent in disposition. After it, his manner was quiet. In this case trauma was the cause of the amnesia.

The following, I take from one of our daily papers, and illustrates another cause of this same condition.

Mr. L——was a popular young rancher in Kern County in '78. He was 23 years of age, and well to do. He married a young lady to whom he was strongly attached. The young couple lived very happily together for sometime, when death suddenly claimed the young wife for its own. The grief of the husband was such, that he could not remain in his now desolate home; so he sold everything and went to the home of his parents. Unable to shake off his trouble, he finally sank into a state of melancholia, from which it was feared that he would never recover. By judicious care, he was partially restored. He bought a ranch in Chico, settled there, and in less than a year after the death of his wife, he married a lady of that place. While his friends were surprised at this, they strangely put it down as an evidence of restored reason. All went well for a time, when suddenly his mind gave way, and he was taken to the Asylum at Stockton. He remained there two years, when it was declared that he had recovered. His wife, with a little one that had been born to her, after her husband had been taken away, went to see him. What was her horror, when she looked into his face, and saw the evidence of restored reason, and yet no sign of recognition of herself. After awhile, the physician and friends made him understand the situation, and he went back to live with his wife upon their evidence.

These four cases are enough to illustrate this phenomena, so I will not cite more.

There are two very important points at issue, in considering these cases. First, how are we to recognize them; and, second, if a person should commit a crime, murder, arson or burglary, while in this state of abnormal consciousness, should he be held responsible. I realize very well, the delicate ground upon which I am treading, in considering this question; but it is a question which any of us, as phy-



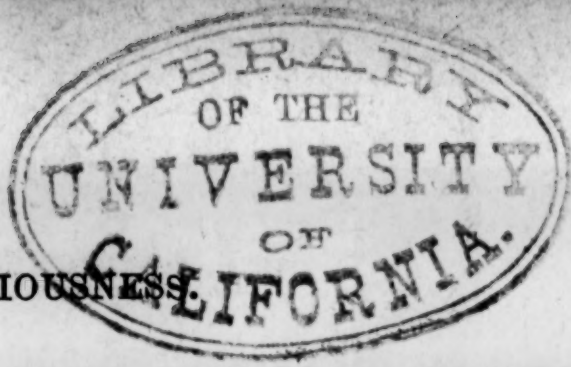
sicians, may be brought to face at any time, and have to answer, so it is well that we should consider it.

Now how are we to recognize these cases. Except in cases due to some traumatic cause, epilepsy or insanity are at the bottom of the trouble, and yet when a person is in an aberrant state of mind, from any of these causes, his actions are the same as if he were in a normal state, and for the time being, there is no way that we can tell the abnormal from the normal condition. It is only by going carefully into the history of the individual; and watching his future course, that we can determine the condition. There are a class of cases of dual consciousness, in which the individual passes frequently from the normal to the abnormal state and "vice versa," and remain but a short time in each, and when in one condition can not remember anything about the other, but can remember what occurred in the former like condition. One knowing such a case could easily tell the normal from the abnormal state, but a stranger could not tell one from the other. It is this class of cases which commit crimes, and then forget all about it.

Dr. Dana collates a case of this class. A Scotch gentleman, a lawyer by profession, suffered from hypochondriasis, and religious melancholia. Dr. Skae, who relates the case, says: He appeared to have a double consciousness, a two fold existence; one half of which he spent in the rational and intelligent discharge of his duties, and the other in a state of helpless hypochondriasis, amounting almost to complete aberration. He remembered nothing of what he did in the aberrant state of mind, and when in that state, remembered nothing of his good days. He was one day well, the next day sick. Dr. Skae states that Abercrombie related to him the history of a similar case.

I have been thinking of late that the White Chapel murderer may belong to one of the latter class of cases, of dual consciousness, and I will give you my reasons for so thinking. In the first place it hardly seems possible that a sane man could commit nine most brutal murders in rapid succession, two in one night, in a thickly populated portion of a large city, without being discovered. Second, a person suffering from any ordinary form of insanity could not well





commit so many murders at stated intervals, without becoming violently maniacal, before he got half through and thus revealing himself. An insane person may cunningly plan a horrible crime, using the utmost caution, against being caught, even waiting months or years before executing his plan. He may kill one or more persons; but it is all done up at once, for the moment he carries out his intentions, he breaks down completely, and becomes a raving maniac. But the man who is in an abnormal state of mind to-night, commits a crime, and is himself to-morrow, has no qualms of conscience, and no need of his avoiding his fellow men; so he goes about his business as usual, reads of the horrible atrocity in the papers, with no more than the usual feeling of horror that any of us would have, upon hearing such a crime.

Now comes the question, should a man be held responsible for his acts during this abnormal state. Any man who commits murder when he is sane should of course be punished according to law; and if he is insane or the plea of dual consciousness be put forth, when he commits the crime, he should be put in such a place that will prevent him from repeating the act; for the rest of his natural life. A man once having committed murder while insane, is never safe, and should be taken care of. If this were the law, men would not be able to avoid the consequences of their crimes as they do now. The plea of dual consciousness, as an excuse for a crime, would have to be sustained by a large amount of collateral evidence, requiring a careful investigation of the life and habits of the individual, and close watching of his future actions.

There are many cases on record, of persons living two separate and distinct lives; and knowing such to be a fact, we will have to consider carefully any such case if it is brought to our notice. The book *Dr. Jekyll and Mr. Hyde* is founded upon this class of cases, and while it is not wholly a myth, yet is terribly overdrawn.

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CONSTANT lying on the back subsequently to labor should be avoided, as tending to uterine prolapse.—*Fra.*



## CASES CURED BY THE TISSUE REMEDIES.

[*Monatsblatter for January and February, 1890. Translated by W. A. D.*]

I. Case of a young girl whose menses had not appeared for several months, and who began to have chest difficulties as a consequence thereof. Kali phos. 30: dose night and morning. The menses soon re-appeared, and in four weeks she had no more chest pains.

II. Chronic enlargement of tonsils in a young girl, where physicians had advised their removal, was cured completely by natrum mur. 30.

III. A woman, aged 44, who had suffered for years from epilepsy, had, on the 11th of February, 1886, two violent attacks. She received on the 12th six powders of kali mur. 12, to take a dose night and morning. She wrote later that since taking the remedy she had had no more attacks. [We do not think this can be classed as a cure, as the time of her writing was not given.—TRANSLATOR.]

IV. On the 6th of March, 1886, a man was brought to me blinded with a gray cataract. The right eye, through an unsuccessful operation and its subsequent inflammation, entirely contracted. The left eye was blind. Without much hope, however, I could not refuse him a trial, since he had been recommended to come to me. I prepared him fifteen powders of kali sulph., to be dissolved in water, and every second day a spoonful to be taken four times. On the 20th I received a letter from his wife, where she said: "Day before yesterday, while walking, I leading my husband, who was carrying his hand organ, he suddenly said, 'You do not need to lead me any more; I can see again!' As I would not believe it, he tore himself loose from me and walked on ahead for half an hour without stumbling, and on another day he saw the trees and, further on, the church steeple of the town to which we were wending our way."

V. A boy, aged 14, who formerly had straight eyes, suddenly began to squint with both eyes outwards. This was completely cured in six weeks by the administration of mag-



nesia phos., and his formally half-closed eyes could be widely opened.

VI. A girl 23 years old, who had suffered since her seventeenth year from epilepsy, received, after having two violent attacks, on the 11th of June, 1885, six powders of kali phos. 20. On the 11th of April, 1887, she wrote: "Since the 15th of June, 1885, I have not had an attack."

VII. A girl aged 28, who always had scanty menses, which during the past year had completely ceased, and caused head and eye troubles, received, May 12th, 1887, kali phos., six powders. After using it six days the menses reappeared with violent headache and lasted seven days, and her other troubles gradually disappeared.

VIII. A lady aged 44 suffered for two years with head and face ache of the right side, and received, on January 23d, 1888, six powders of magnesia phos. She writes, on the 12th of June of the same year, that she has fully recovered from her pains.

IX. A. G—— had a love affair, and, in order to kill herself, took poison, which left her with paralyzed hands and feet. I gave her six powders of calcarea phos., and four weeks later she wrote me that she could go around the room by taking hold of the furniture. She received six more powders, which completed her recovery.

X. K. B——, 14 years old, had a growth upon the chest, which continually suppurated and could not be made to heal. He came to me on the 28th day of November, 1888, and received calcarea sulph. 3rd, which he took six days, and then six powders of silicea, which he took for twelve days. January 22d, 1889, he was completely restored to health.

XI. A boy of 13 had suffered since the age of 6 from trembling of the limbs, and was gradually passing into a state of epilepsy. He received, on the 8th of October, 1888, kali chlor. six powders. Since the 10th of December he has had no return of it.



## Ophthalmology and Otology.

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CONDUCTED BY H. C. FRENCH, M. D.

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### REPAIRING CORNEAS.

Dimmer, of Vienna, has been experimenting on the corneas of rabbits with a view of restoring vision in cases of total opacity; and claims to have succeeded by making a small opening in the opaque cornea with a trephine, and inserting a transparent shell of celluloidine. Having as he believes, succeeded in rabbits, he has extended his experiments to the genus homo, and though after 11 weeks the result seems unchanged, high authorities on such matters believe that ultimately the shell, will be cast off, and the eye return to its original condition, and perhaps be even "Dimmer" than before the operation. F.

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### Relation of the Size of the Cornea to Glaucoma.

Priestly Smith instituted interesting and very extensive investigations as to the relation of the size of the cornea to primary glaucoma. As a result of his researches, he claims that while the cornea is fully developed at the age of five or even earlier, not adding one-tenth of a millimetre to its diameter subsequent to that age, the lens is not full grown till much later, often adding two millimetres to its diameter after the cornea has ceased to grow. Of one thousand normal eyes not one cornea was found so small as ten millimetres in diameter, while a much smaller glaucomatous group revealed nine which fell below that measurement. His researches disprove an old belief that the cornea is smaller in the hypermetropic than in the myopic eye, and shows that the size of the cornea has no effect upon the refraction, which claim was further proven by a comparison of ninety highly hypermetropic with the same number of highly myopic eyes. Comparing a small glaucoma group with the same life period of a larger healthy group, it was found, that the small cornea formed twenty-six per cent. of



the glaucoma group, and only four per cent. of the healthy. Having proved a definite relation between the small cornea and primary glaucoma, he claims that the explanation of this relation is found in an undue proximity of the lens to the surrounding structures. It is hoped that these investigations will be continued, and that through them we may receive light upon the hitherto very obscure pathology of this common and destructive disease. F.

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## Colleges and Hospitals.

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### HAHNEMANN HOSPITAL TRUSTEES.

The following gentlemen have recently been appointed as trustees of Hahnemann Hospital of this city: J. R. Jarboe, William Jarvis, P. R. Lilienthal, Louis Sloss, F. S. Chadbourne, and Sidney Cushing. The finances of this institution are in a most excellent condition, and we hope soon to see a suitable building erected for it.

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### Southern Homœopathic Association.—Bureaux for 1890.

Materia Medica: Chairman, H. C. Morrow, M. D., Sherman; Practice: Chairman, G. W. Sherbino, M. D., Abilene; Surgery: Chairman, Joseph Jones, M. D., San Antonio; Obstetrics: Chairman, A. T. Hall, M. D., Waco; Pædology: Chairman, J. W. Dickey, M. D., Weatherford; Gynecology: Chairman, M. Ellen Kellar, M. D., Fort Worth; Ophthalmology: Chairman, G. St. Clair Hussey, M. D., Brenham; Institutes: Chairman, T. G. Edwards, M. D., Blanco; Legislation: Chairman, G. G. Clifford, M. D., San Antonio.

*To the Chairman of the Bureaux:* Kindly urge each member of your Bureaux to prepare a good paper for our meeting. Ask each member to report the subject of his paper within a specified time. Chairman, report to the Secretary by March 20th.



*To Members:* Each of you are interested in the welfare of our Association, and therefore it behooves you to exert yourself in preparing good practical papers; to see that every Homœopath in the State belongs to the society.

G. G. CLIFFORD, *Secretary.*

J. R. POLLOCK *President.*

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## Editorial Notes.

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### THANKS, JUDGE LEVY.

Judge Walter Levy, of the Superior Court, deserves the esteem of every homœopathic physician in California for having had the honesty and courage to appoint a homœopath as a State Commissioner of Insanity. In our article in the February HOMŒOPATH we called attention to the fact that every medical position of honor or emolument throughout the entire State has been placed in the hands of the allopaths, and that persistently and most unjustly our school has been discriminated against; and although a very large proportion of the intelligent and wealthy taxpayers of California are believers in and adherents to the homœopathic system of medicine, we have until now utterly failed to obtain the recognition we deserve. We are pleased to have our request so promptly answered, and wish to extend to Judge Levy our sincere thanks, and to assure him that we shall not soon forget the man who has been first among public officials to treat the homœopaths of California in a square and honorable manner. It is true Judge Levy has done only what the homœopaths of California have a right to demand from all who have the appointment of medical officials under their control, for we insist that in common justice the large homœopathic sentiment in every intelligent community should receive public recognition, and that no institution in the State, supported by general taxation, should be without a fair proportion of homœopathic physicians on its staff. We are confident that this appointment by Judge Levy is but the forerunner of others to follow, and that very soon our



county and municipal hospitals, insane asylums and other public institutions will be presided over and controlled by reputable and educated physicians of both schools of medicine, and that the people whose money is used in their support may be able to choose the system of therapeutics that shall be applied to their relief.

C. L. T.

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## Correspondence.

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EDITORS CALIFORNIA HOMŒOPATH—As La Grippe has been a leading topic of conversation both in Europe and America for a period of several months, and as many theories have been advanced respecting its pathology and treatment, together with much practical experience in the use of a large list of remedies, it might not be amiss for me to give my personal experience.

During my late sojourn in Europe the malady prevailed to a very alarming extent. In some localities the death rate was increased four fold. People who suffered from serious chronic affections of the lungs, stomach, or kidneys were very liable to succumb to its baneful influence.

Quinine was almost the only dependence among the old school physicians. The more violent the attack the larger and more frequently repeated were the doses prescribed.

On my return from Hamburg to Bremen, Germany, on the 28th of December last, I had a most violent attack. It began with a violent chill, bone pains, headache, backache, a feeling of soreness all over the body, and a persistent dry hacking cough. No attack could be more pronounced. On my arrival at the hotel I ordered a hot fire in my room and then took two doses of aconite 3x diluted in water; half an hour apart. In one hour after taking the first dose a profuse perspiration followed which lasted for a period of three hours. All of the symptoms of the malady ceased as soon as the perspiration was well established. I took no other medicine, as no catarrhal or other symptoms followed, and I have been perfectly well ever since.

Yours truly, E. J. FRASER, M. D.

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FOR "BLACK EYE," there is nothing to compare, says the *N. Y. Med. Times*, with the tincture of a strong infusion of capsicum annum mixed with an equal bulk of mucilage of gum arabic, and with the addition of a few drops of glycerin. This should be painted all over the bruised surface with a camel's hair pencil and allowed to dry on, a second or third coating being applied as soon as the first is dry. If done as soon as the injury is inflicted, this treatment will invariably prevent the blackening of the bruised tissue. The same remedy has no equal in rheumatic sore or stiff neck.



## Personals.

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DR. F. F. DEDERKY has removed from San Francisco to his old home in Mobile, Ala.

DR. E. J. FRASER has recently returned from Europe, and has resumed practice at his old office, No. 112 Kearny street.

*Medical Topics* is the name of a new journal published quarterly by W. A. CHATTERTON, in Chicago. It is to fill a long-felt want.

LA GRIPPE has petered out, and the busy doctor is now trying to collect his bills, but from all accounts is meeting with poor success.

DR. J. G. NELLIS has located in Garberville, Humboldt County. We believe that the doctor is the pioneer homœopathist of that region.

DR. J. A. CALLEN, formerly of Cloverdale, recently paid us a call. The Doctor is now located at Oakland, where he reports business as thriving.

DR. R. H. CURTIS recently performed laparotomy at the Hahnemann Hospital. The Doctor has been doing considerable of this line of work of late.

DR. C. J. HOLMGREN, of the class of '89, has opened an office at No. 2096 Market street. This is in the vicinity of the college, and ought to be a good location.

The *Medical Era* and the *Medical Counsellor* have consolidated. Brothers GATCHELL and McLACHAN will make a fine team, and their combined efforts will mark the dawn of a new and bright "Era." Our congratulations.

DR. C. L. CLEVELAND, the Professor of Materia Medica in the Cleveland Homœopathic College, recently died after a short illness. The Doctor was the author of the well-known work entitled, "Salient Materia Medica." His death was a great loss to the college as well as to the profession at large.

DR. JAMES E. LILIENTHAL has recently been appointed Commissioner of Insanity for the district of San Francisco. This is the first appointment of a homœopathic physician to an official State position in California, and Judge LEVY, who made the appointment, is one of the few who are in favor of equal rights in medicine as well as in law. We hope that this will pave the way to other and more important homœopathic appointments, such as a position on the health boards, City and County Hospital visiting staff, etc.

We are pained to record the death of Dr. G. W. BARNES, of San Diego. The Doctor was the first homœopathic physician in San Diego. He removed



from Cleveland, Ohio, several years ago, on account of ill health, where he occupied a professorship in the homœopathic college. He was a prominent man in San Diego, holding several important positions, among others the presidency of the San Diego Academy of Sciences, of which he was the founder. His loss will be regretted, and his genial countenance missed by a host of friends.

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## Book Reviews.

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**Practical Electricity in Medicine and Surgery.** By G. W. OVERALL, M. D. For sale by J. H. Vail & Company, 31 Astor place, New York. Price, \$1.00.

This little work gives a short and concise summary of the practical uses of electricity, and demonstrates its usefulness in certain diseases, such as the cure of stricture by electrolysis. The first chapter is devoted to the general considerations of currents and cells, or electro-physics; the second to electro-physiology; the third to electro-therapy, and the fourth to electro-surgery. It is amply illustrated, and contains the reports of about eighty-five cases treated by electricity. It is a neat and cheap book, within the reach of all, and the general practitioner can learn all about electricity without having to wade through a larger and more complex work.

**Transactions of the Homœopathic Medical Society of the State of New York, 1889.**

Taking all in all, the transactions of 1889 must be considered an improvement on former volumes, and a more thorough belief in Hahnemann's law gains ground among the younger members of the profession. Still, old Adam is not dead, and we would ask Drs. Gorham and Laird whether they ever saw morphine remove the pathological state which caused the formation of biliary and renal calculi, for here the homœopathic treatment by Thayer's cinchona, by the lime salts, by our antibilious remedies comes in, while the momentary relief by morphine is outweighed by a tendency of reproduction of the spasm. The old story of palliation versus a cure.

The bureau of materia medica has done noble work, and we trust the work will be kept up. It necessitates the study of a drug, a comparison with other drugs, and the more such individualization takes place, the more benefit will accrue to the student, who will become fascinated with such work.

Ophthalmology and otology are favorites with our physicians, and Norton's article on Senega, and Linnal's on kali mur., are worthy of more than a passing notice. One stretches the eye, the other the rectum, which only shows that we are not laymen, but physicians who understand the limit of the law, even as Hahnemann taught us in the Organon.

In relation to legislation, let us remain aggressive, and do not believe in the fair words of the wolf in sheep's clothing. Let the regulators (!) mind their own business; the homœopathic branch is perfectly able to paddle its own canoe and to take care of the dear public.

S. L.



## PAMPHLETS RECEIVED.

**Conception.** By E. A. DE CAIHOL, M. D., Los Angeles. A reprint from the *Southern Clinic*.

**Enucleation of Tuberculous Glands.** By THOMAS W. KAY, M. D., Scranton, Pa.

**Erythroxyton Coca;** its Value as a Medicament. By MARC LAFFONT, M.D.

**Adolescence.** By JAMES I. FELLOWS, New York.

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Clinical Items.

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A KEY-NOTE to bromium is flaxen hair in children.

*Pulsatilla* has frontal headache, with feeling as of eyes would start out of head—also much aching in facial bones.

DUCHENE gives kali phos. in solution (dram to the oz.) in teaspoonful or dessertspoonful doses to allay the thirst of diabetes.

*Anthracinum*.—Succession of boils. This medicine corresponds to this condition when there are no other symptoms to guide.—*Dr. Clarke*.

*Ferrum phos.*—In vicarious menstruation, when the patient just begins to expectorate blood. The hæmoptysis will stop and the menses appear.—*Professor Foster*.

JATROPHA URENS is the most poisonous plant known to man. Even the touch of it will stop the circulation of the blood, and cause numbness and swelling.—*Current*.

*Natrum carb.*—All troubles of the external nose, which may attain a morbid size; may have pimples on it, etc.; puffiness of nose; bad smell of nasal secretion.—*Guernsey*.



*Staphisagria*.—In cases of throat affection, such as enlarged tonsils, if the patient complains of *stitches flying to the ear* (especially the left) *on swallowing*, *staphisagria* is the remedy.—*Dr. Clarke*.

*Euphrasia* solution is almost a panacea in the local treatment of muco-purulent ophthalmia, when there is much mucus of a tenacious, stringy character; matter floats over the eye; external canthi are excoriated and red.

*Ferrum mur.* 3x has become a standard remedy with me in the treatment of girls with arrested menstruation, and of boys with tendency to seminal emissions or copious urination at the age of puberty.—*Professor Woodward*.

*Oxalic acid* has long been a favorite remedy with me in cardiac troubles occurring in highly "nervous" patients. In these cases, it must not be mistaken for *baryta carb.* which also has an aggravation from thinking of it.—*S. A. J.*

DR. ZUCKERKANDL, Professor of Anatomy at Vienna, and one of the ablest Anatomists of the present time, has recently demonstrated that it is almost impossible to wound the internal carotid artery in the operation of excision of the tonsils, or in opening a retro-pharyngeal abscess. Dr. Zuckerkandl is noted for his original investigations in Anatomy—a science thought to be almost perfect—especially those upon the Anatomy of the perinaeum.

*Calendula* is of great use in the local treatment of ulcerating and eczematous surfaces. *A great disposition to take cold, especially in damp weather* is a valuable keynote for it; for its internal use in amal and other troubles. Deafness when worse in damp surroundings and when eczematous conditions are present. Moist catarrhal manifestations of vascular deafness.—*R. T. Cooper*.

*Chrysophanic Acid* is a useful remedy in some forms of blepharitis ciliaris, externally one to 1000 vaseline or lanolin. Its symptoms point to optical hyperaesthesia, a condition



for which we have but a limited number of remedies. Most applicable to those cases of retinal asthenopia which are caused by undue irritations of the ciliary system from straining the eye, either by an intense or insufficient illumination. —*E. W. Beebe, M. D.*

*Kali mur.* is the only drug I know of that produces true gangrene of the mouth with all its terrible consequences. Since it came into use at the Five Points House of Industry, where many cases of this terrible disease are presented, nearly every case has been cured, while previously the mortality was large.—*Professor T. F. Allen.*

DR. EUSTACE SMITH says that the usual cause of constipation in children is due to improper or inappropriate feeding. That any food which over taxes the child's digestion and thus burdens the alimentary canal with undigested residue, will excite a mild catarrh of the intestinal mucous membrane. The fecal rendered slimy by this secretion, affords no sufficient resistance to the contractions of the muscular coat, so that this slips ineffectually over the fecal masses.

*Calcareo.*—Dry cough during the night, with free expectoration in the morning; it is associated with sticking pains through the chest from before backward, not in the side as *kali*—Again, the *calcar.* patient is very apt to have hæmorrhage after an attack of coughing. He perspires easily, has sluggish digestion and a marked indication is the excessive dyspnœa from slight exertion, which is out of all proportion to the local condition of the lung.—*Allen.*

*Dioscorea.*—The chief land-mark is the peculiar pain embracing the umbilicus, the size of a silver dollar, and from this point the pains radiate in all directions; headaches, neuralgia, renal colic, cystitis, pains in testicles and spermatic cord, dysmenorrhœa, after-pains, angina pectoris, cough, etc., with pain in region of umbilicus, yield kindly to this drug. There is no remedy equal to this in sinking at the pit of the stomach—gone feeling in stomach, also with pyrosis.